

L11000054976

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H230001398873))



~230001398873~

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : US CONTACTOR INC
Account Number : 128288886121
Phone : (772)928-1700
Fax Number : (888)772-8108

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DANALAN & CO LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

CLERK OF STATE
TALLAHASSEE, FLORIDA

2023 APR 14 PM 3:39

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RECEIVED
9:11 AM 4/14/2023
DIVISION OF CORPORATIONS
STATE OF FLORIDA

M. SOLOMON
APR 17 2023

H23000139887 3

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DANALAN & CO LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

- The Articles of Organization for this Limited Liability Company were filed on 05/10/2011 and assigned Florida document number 111000054976.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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SECRETARY OF STATE
190 N. DE SOTO STREET
TALLAHASSEE, FL 32301

If attending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	BALBIANO, ALAN	3 BIS RUE DES ROSIERS	☒ Add
		GOURNAY SUR MARNE 93460 FR	☐ Remove
			☐ Change
AMBR	BALBIANO, DANA	3 BIS RUE DES ROSIERS	☒ Add
		GOURNAY SUR MARNE 93460 FR	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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CLERK OF DISTRICT COURT

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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